

# COMMONWEALTH OF VIRGINIA



## NATIONAL VOTER REGISTRATION ACT TRAINING & REFERENCE MANUAL

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## **CHAPTER 1 - INTRODUCTION**

### **THE PURPOSE OF THE ACT**

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The purpose of the National Voter Registration Act is to increase the number of citizens registered to vote and to establish safeguards that ensure a citizens' right to vote. The Act is designed to increase the number of Americans registered to vote by requiring many public agencies to provide registration opportunities to their clients in conjunction with other services.

### **DEFINITION OF VOTER REGISTRATION SITES**

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In addition to the Department of Motor Vehicles, the National Voter Registration Act of 1993 requires that individuals be given the opportunity to register to vote (or to change their voter registration data) in elections for federal and/or state office when applying for (or receiving) services or assistance from certain other state agencies designated by statute.

### **WHEN TO PROVIDE CLIENTS AN OPPORTUNITY TO REGISTER**

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Individuals must be provided this opportunity not only at the time of their original application for services, but also when filing any recertification, re-admission, renewal, or change of name or address form relating to such services [42 D.S.C. § 7(a)(6)(A)].

You must provide the clients at your agency with the same level of assistance, including bilingual services where necessary, in completing a voter registration and/or certification form as you provide in completing your own forms, unless the applicant refuses such assistance [42 D.S.C. §§ 7(a)(4)(A)(ii) and 7(a)(6)(C)].

### **INFLUENCING PREFERENCE OF AN INDIVIDUAL**

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The person who provides such services as stated previously in the agency is prohibited from:

- ⇒ seeking to influence an applicant's party preference,
- ⇒ displaying any such political or candidate preference or party allegiance,
- ⇒ making any statement or taking any action whose purpose or effect is to discourage the applicant from registering to vote, or
- ⇒ making any statement or taking any action whose purpose or effect is to lead the applicant to believe that a decision whether or not to register has any bearing on the availability of services or benefits [42 D.S.C. § 7(a)(5)].

## **DOCUMENTS TO REGISTER OR DECLINE**

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Those who accept or decline to register to vote must do so by completing the *Commonwealth of Virginia Voter Registration Agency Certification* form. The certification form and its instructions are provided in Chapter 3 of this document. This form is to be kept in the client's file, or other designated place, so other agency personnel will know that an individual has been offered the opportunity to register. **Note: Do not mail certification forms to the State Board of Elections.**

If a client requests to register to vote, a *Virginia Voter Registration Application* form must be completed. An example of the *Virginia Voter Registration Application* form and instructions on completing the form are provided in Chapter 4 of this document. These forms are then forwarded to the State Board of Elections for processing.

## **VOTER CONFIDENTIALITY**

No information regarding a person's declination to register may be used for any purpose other than voter registration [42 U.S.C. § 7(a)(7)].

Similarly, if an individual does register to vote, the particular agency at which the applicant submits a voter registration application may not be publicly disclosed [42 U.S.C. §§ 8(a)(6) and 8(1)(1)].

The application cannot be copied or used for any purpose other than voter registration in the , Commonwealth of Virginia.

## **DESIGNATED AGENCY VOTER REGISTRATION SITES**

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In the Commonwealth of Virginia, the following agencies have been designated as voter registration sites:

- Department for the Deaf and Hard of Hearing
- Virginia Office Protection and Advocacy
- Department for the Blind & Vision Impaired
- Department of Game and Inland Fisheries
- Department of Health
- Department of Mental Health, Mental Retardation & Substance Abuse Services
- Department of Motor Vehicles
- Department of Rehabilitative Services
- Department of Social Services
- Virginia Employment Commission in Northern Virginia Planning District 8
- Colleges & Universities (Disabilities Support Services)
- Va. Centers for Independent Living

## **IMPLEMENTATION OF VOTER REGISTRATION**

The National Voter Registration Act of 1993 was implemented at these agencies on March 6, 1996. The State Board of Elections distributes all required manuals, forms, and envelopes to the various agencies.

## **CHAPTER 2 – GENERAL INFORMATION**

### **WHO MAY REGISTER?**

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To be eligible to vote in Virginia, a person:

- Must be a citizen of the United States
- Must live in the Commonwealth of Virginia  
*A person who has come to Virginia for temporary purposes and intends to return to another state is not considered a resident for voting purposes*
- Must be at least 18 years old by the date of the next general election
- Must not claim the right to vote elsewhere
- Must not currently be in prison or on parole for the conviction of a felony, or judged by a court to be incapacitated (unless civil rights to vote had been restored by the Governor or a court order has restored you to capacity)

### **WHAT IS THE DEADLINE TO REGISTER?**

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The voter registration application form must be received by either the local voter registration office or the State Board of Elections no later than 29 days before the general, primary, and 14 days before a special election in which a person wants to vote.

### **HOW OFTEN SHOULD ONE REGISTER?**

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Anytime your name and/or address changes, a person should submit a new registration application. If a person is unsure that he/she is registered, the individual should fill out a new application form.

### **HOW TO COMPLETE THE APPLICATION FORM?**

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Refer to Chapter 4 of this document for specific instructions.

## **HOW WILL A PERSON KNOW IF THE REGISTRATION WAS ACCEPTED?**

Once the local registrar has determined (through the information provided on the application) that an individual is eligible to vote, a voter registration card will be mailed to the individual at the address on the application.

## **WHERE TO DIRECT QUESTIONS?**

Contact the State Board of Elections NVRA/ Voter Registration Coordinator for:

Election Dates

Any questions concerning NVRA's rules and regulations

Phone: (804) 864-8910

Contact your Distribution Center for:

(Refer to Appendix I)

Supply of forms or envelopes

Contact your Agency for:

Internal procedures

Where to file certification forms

Procedures for transmittal of application forms

Contact your Local Registrar for:

(Refer to Appendix II)



Questions concerning applications

## CHAPTER 3 – CERTIFICATION

The following form is used by the agencies as part of the agency voter registration process that certifies the agency has provided an individual the opportunity to register to vote. An individual may decline to register by not checking the boxes on the form or failing to sign the form.

### CERTIFICATION FORM

The following is an example of the certification form:

	<b>Commonwealth of Virginia</b> <b>Voter Registration Agency Certification</b>						
<p><b>If you are not registered to vote where you live now, would you like to apply to register to voter here today?</b></p> <p style="text-align: center;"><b>(Please check only one)</b></p> <p><input type="checkbox"/> I am already registered to vote at my current address, or I am not eligible to register to vote and do not need an application to register to vote.</p> <p><input type="checkbox"/> Yes. I would like to apply to register to vote. (Please fill out the voter registration application form)</p> <p><input type="checkbox"/> No. I do not want to register to vote.</p> <p>If you do not check any box, you will be considered to have decided not to register to vote at this time. Applying to register to vote or declining to register to vote will not affect the assistance or services that you will be provided by this agency.</p> <p>If you decline to register to vote, this fact will remain confidential. If you do not register to vote, the office where your application was submitted will keep it confidential, and it will be used only for voter registration purposes.</p> <p>If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private if you desire.</p> <p><b>If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, you may file a complaint with:</b></p> <p style="text-align: center;"><b>Secretary of the Virginia State Board of Elections</b> <b>Ninth Street Office Building</b> <b>200 North Ninth Street Room 101</b> <b>Richmond, VA 23219-3497      (804) 786-6551</b></p> <table style="width: 100%; border: none;"><tr><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">Applicant Name</td><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">Signature</td><td style="width: 33%; border-bottom: 1px solid black; text-align: center;">Date</td></tr></table> <p style="text-align: center;"><b>for agency use only</b></p> <p>Voter registration form completed: <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Voter registration form given to applicant for later mailing (at applicant's request) <input type="checkbox"/></p> <table style="width: 100%; border: none;"><tr><td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Agency Staff Signature</td><td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Date</td></tr></table> <p>032-03-945</p>			Applicant Name	Signature	Date	Agency Staff Signature	Date
Applicant Name	Signature	Date					
Agency Staff Signature	Date						

## **COMPLETION OF THE FORM BY APPLICANT**

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1. All new applicants or anyone recertifying, renewing or changing their name or address for your services must be offered an opportunity to register to vote or change the information on their voting file.
2. You must inform all applicants that they should read and understand the statements found on the certification form as follows:

**If you are not registered to vote where you live now, would you like to apply to register to vote here today?**

**If you do not check any box, you will be considered to have decided not to register to vote at this time. Applying to register to vote or declining to register to vote will not affect the assistance or services that you will be provided by this agency.**

**If you decline to register to vote, this fact will remain confidential. If you do register to vote, the office where your application was submitted will remain confidential, and may be used only for voter registration purposes.**

**If you would like help in filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private, if you desire.**

**If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, you may file a complaint with:**

**Secretary of the Virginia State Board of Elections  
Ninth Street Office Building  
200 North Ninth Street Room 101  
Richmond, VA 23219-3497  
Telephone: (804) 864-8901**



3. Once the applicant has checked one of the three boxes at the top of the form, review the following:

- ✓Has the applicant printed his/her name in the *Applicant Name* space?
- ✓Has the applicant signed the form in the *Signature* space?
- ✓Has the applicant dated the form with to day's date in the *Date* space?

4. If any information is missing or not legible, return the form to the applicant for completion or clarification.



If a person does not fill out the form or refuses to sign the form, print the individual's name on the form and place your initials beside the name. **This will be considered a declination to register to vote.**

### COMPLETION OF THE FORM BY AGENCY

After the certification form has been filled in correctly, you may accept it and complete the agency portion of the form.

#### **FIRST OR THIRD BLOCK CHECKED:**

1. Mark the 'No' box next to the "Voter Registration Form Completed" statement.
2. Sign your name and date the form at the bottom of the page.
3. **Place the form in a specified location to be filed at your agency at a later date. Do not mail certifications to the State Board of Elections**

#### **SECOND BLOCK CHECKED:**

1. If the individual wants to register to vote, give the individual a copy of the *Virginia Voter Registration Application* form, providing whatever assistance the individual indicates is needed to complete it. Once completed, mark the 'Yes' box next to the "Voter registration form completed" statement.
2. If the individual requests to take the form to be filled out later, mark the box next to the "Voter registration form given to applicant for later mailing" statement.
3. Sign your name and date the form at the bottom of the page.

4. **Place the certification form in a specified location to be filed at your agency at a later date.**
5. Place the completed voter registration application form in a specified location to be mailed to the State Board of Elections.

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## **FILING THE CERTIFICATION FORM**

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The certification form should be kept in the client's file or designated place, so other agency personnel will know that the individual has been offered an opportunity to register. This form should be retained until superseded or until the client becomes inactive with your agency.

If additional blank forms are needed, you may photocopy these forms.

## **CHAPTER 4 - REGISTRATION**

### **HANDING OUT VOTER REGISTRATION APPLICATION FORMS**

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The applicant can either fill out the form at the agency or take the form home and mail it or hand carry it to any local registration office, the State Board of Elections or other voter registration site. The application form must be received by either the local voter registration office or the State Board of Elections no later than 29 days before the general, primary, or 14 days before a special election in order for the applicant to be eligible to vote in that election.

### **VOTER REGISTRATION APPLICATION FORM**

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The following is an example of the front of the application form:

**SEE EXAMPLE ON NEXT PAGE**

## VIRGINIA VOTER REGISTRATION APPLICATION FORM

**Use this form to register to vote in Virginia or report a change in name or address.**

**To register to vote in Virginia, you must:**

- ✓ Be a **United States citizen**
- ✓ Be a **resident of Virginia**
- ✓ Be **18 years old by the next general election**
- ✓ Have **had your voting rights restored** if you have ever been convicted of a felony
- ✓ Have **had your capacity restored** if you have ever been declared mentally incapacitated in a Circuit Court

**IMPORTANT!**

**DEADLINE: 29 DAYS BEFORE THE ELECTION**

This form must be postmarked (or delivered to the county or city voter registration office or DMV) no later than 29 days before the election in which you plan to vote. However, if you are already registered to vote at your current address, you do not need to re-register. Photocopies of this application are accepted with an original signature. The only time faxes are accepted is for an address change.

**PRIVACY ACT NOTICE:** Article II, section 2 of the Constitution of Virginia (1971) requires that a person registering to vote provide his or her social security number, if any. Therefore, if you do not provide your social security number, your application for voter registration will be denied. Section 7 of the Federal Privacy Act (Public Law Number 93-579) allows the Commonwealth to enforce this requirement, but also requires that you be advised that state and local voting officials will use the social security number as a unique identifier to ensure that no person is registered in more than one place. This registration card will not be open to inspection by the public. Your social security number will appear on reports produced only for official use by voter registration and election officials, and for jury selection purposes by courts.

**WARNING:** INTENTIONALLY MAKING A FALSE STATEMENT ON THE VOTER REGISTRATION APPLICATION CONSTITUTES THE CRIME OF FRAUD, WHICH IS PUNISHABLE UNDER VIRGINIA LAW AS A FELONY. VIOLATORS MAY BE SENTENCED TO UP TO 10 YEARS IMPRISONMENT, OR UP TO 12 MONTHS IN JAIL, AND FINED UP TO \$2,500.

**ATTENTION:** You must answer the boxes 1 – 11. If you do not complete all of the specified boxes your application will be denied. Once your local registrar approves your application, you should receive a voter card.

1	<b>Commonwealth of Virginia</b> <b>PREVIOUS VOTER REGISTRATION INFORMATION (REQUIRED)</b>				
	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> No I have never registered to vote in the past.  <input type="checkbox"/> YES I am registered to vote at another address in Virginia or in another state.         </div> <div style="text-align: right;">           ➔ If no, skip to Box 2.            ➔ If yes, the information below must be completed.         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>           FULL LEGAL NAME _____            ADDRESS AT WHICH YOU WERE            PREVIOUSLY REGISTERED TO VOTE _____            CITY/TOWN _____ State _____            CITY/COUNTY/TOWN OF RESIDENCE (IF APPLICABLE) _____         </div> <div style="text-align: right;">           DATE OF BIRTH _____            LAST 4 DIGITS OF SOCIAL SECURITY NUMBER _____            ZIP CODE _____         </div> </div> <p style="text-align: center; font-size: small;">This cancellation will be sent to the County or City and State you enter above.</p>				
2	Are you a citizen of the United States of America? <input type="checkbox"/> YES <input type="checkbox"/> NO		Will you be 18 years of age on or before election day? <input type="checkbox"/> YES <input type="checkbox"/> NO		If you checked "no" in response to either of these questions, do not complete this form
3	SOCIAL SECURITY NUMBER _____		4	GENDER [CIRCLE ONE] MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	
				5	DATE OF BIRTH _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>M</span><span>M</span><span>D</span><span>D</span><span>Y</span><span>Y</span><span>Y</span><span>Y</span> </div>
6	LAST NAME [PRINT] _____		FIRST NAME _____		FULL MIDDLE OR MAIDEN NAME _____
				SUFFIX [JR, SR, III, ETC.] _____	
7	RESIDENCE/HOME ADDRESS (IF RURAL ADDRESS, DESCRIBE BELOW) _____		APT/UNIT/LOT/RM/SUITE _____		CITY OR TOWN _____
				ZIP CODE _____	
IF <b>RURAL ADDRESS</b> , DESCRIBE WHERE YOUR HOUSE IS LOCATED _____ (I.E., WHAT IS THE STATE ROAD NUMBER WHERE YOUR HOUSE IS LOCATED? WHICH SIDE OF THE ROAD-NORTH, EAST, ETC.; NEAREST LANDMARK)					
MAILING ADDRESS (if different) VIRGINIA P.O. BOX OR UNINFORMED SERVICE ADDRESS, if applicable (INCLUDE ZIP CODE) _____				8	NAME OF CITY OR COUNTY OF RESIDENT _____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> CITY OR <input type="checkbox"/> COUNTY OF         </div>
9	• Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No • If YES, have your voting rights been restored? <input type="checkbox"/> Yes <input type="checkbox"/> No • If YES, when restored? [Required] Mo _____ Day _____ Year _____		10	• Have you ever been judged to be incapacitated? <input type="checkbox"/> Yes <input type="checkbox"/> No • If YES, has court restored you to capacity? <input type="checkbox"/> Yes <input type="checkbox"/> No • If YES, when restored? [Required] Mo _____ Day _____ Year _____	
11	<b>REGISTRATION STATEMENT:</b> I SWEAR/AFFIRM, UNDER FELONY PENALTY FOR MAKING WILLFULLY FALSE MATERIAL STATEMENTS OR ENTRIES, THAT I AM A U.S. CITIZEN AND A RESIDENT OF VIRGINIA, THE INFORMATION I HAVE PROVIDED ON THIS FORM IS TRUE, I AUTHORIZE THE CANCELLATION (ENTERED IN BOX 1 ABOVE) OF MY CURRENT REGISTRATION, AND I HAVE READ THE PRIVACY ACT NOTICE ABOVE. <b>↓ REMINDER: SIGN HERE FOR VOTER REGISTRATION (OR MARK IF UNABLE TO SIGN).</b>  SIGN HERE ► _____ DATE ➔ _____  If applicant is unable to sign, write below the name/address of person who attested: (REQUIRED) _____				
Yes, I am interested in working as an Election Official on Election Day. Please send me Information		If you are <b>active or retired law enforcement</b> , or if you have a <b>protective court order</b> , you may request that your home address not be released. You must show a Virginia P.O. Box under mailing address in box 7 above.			<input type="checkbox"/> Check here if you have a disability that requires accommodation in order to vote.
		<input type="checkbox"/> ACTIVE/RET LAW ENFORCEMENT <input type="checkbox"/> PROTECTIVE COURT ORDER			
REGISTRATION DATE	PCT	TOWN CODE	DENIAL DATE & TEASON	COMMENTS	

VA – NVRA - 1 REV. 10/03

The following is an example of the back of the application form:

OFFICE USE ONLY		OFFICE USE ONLY		OFFICE ONLY	USE
NEW LAST NAME	NEW FIRST, MIDDLE/MAIDEN NAME AND SUFFIX			DATE CHANGED	
OTHER CHANGES	NEW PCT	AUTHORIZED BY		DATE CHANGED	
<input type="checkbox"/> DECEASED _____ —	<input type="checkbox"/> INCOMPETENT _____ JUDGED		<input type="checkbox"/> OUT _____ TRANSFERRED		
<input type="checkbox"/> STATE _____ OUT OF	<input type="checkbox"/> DELETED _____ ERROR		<input type="checkbox"/> REGISTERED _____ RE-		
<input type="checkbox"/> REQUEST _____ PERSONAL	<input type="checkbox"/> PURGE _____ LEGAL		<input type="checkbox"/> STATUS _____ INACTIVE		
<input type="checkbox"/> FELONY _____ CONVICTED OF	<input type="checkbox"/> _____		<input type="checkbox"/> ACTIVATED _____ RE-		
NOTES:					

### COMPLETION OF THE APPLICATION FORM

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1.	Check that <u>all</u> information has been filled in completely. If a box does not apply to an individual, the word 'none' should be written in or a box which indicates 'none' should be marked. Failure to complete the form properly could result in a denial of the application.
2.	Check that the client has signed and dated the application.
3.	On the "return address" portion of the application form, the applicant can mail their completed, signed application to the registrar's office in the county or city where they live. The registrars' office are listed in alphabetical order by the name of the county or city.
4.	No photocopies or other reproductions of the form (i.e., fax) will be accepted.
5.	Place the completed application form in a specified location to be forwarded to the State Board of Elections.
<b>INSTRUCTIONS TO COMPLETE THE APPLICATION FORM</b>	
<b><i>Body of the Form</i></b>	
The following is a list of the information to be entered followed by a definition and example, where applicable, of each information block to help answer any questions your client may have:	

No.	INFORMATION BLOCK TITLE	DESCRIPTION	EXAMPLE
1	PREVIOUS REGISTRATION INFORMATION	ARE YOU REGISTERED TO VOTE AT ANOTHER ADDRESS? IF YOU ANSWER 'YES', PLEASE FILL IN ALL THE INFORMATION IN THIS SECTION.	
2	ARE YOU A CITIZEN OF THE UNITED STATES & WILL YOU BE 18 YEARS OF AGE ON OR BEFORE THE ELECTION DAY?	CHECK EITHER THE 'YES' OR 'NO' BOX TO ANSWER THIS QUESTION. <b>IF YOU CHECKED 'NO' TO EITHER QUESTION, DO <u>NOT</u> FILL OUT THIS FORM.</b>	
3	SOCIAL SECURITY NUMBER	ENTER THE NINE-DIGIT NUMBER ISSUED BY THE SOCIAL SECURITY OFFICE. THIS INFORMATION WILL BE HELD IN STRICT CONFIDENCE AND WILL ONLY APPEAR ON REPORTS PRODUCED FOR OFFICIAL USE BY VOTER REGISTRATION AND ELECTION OFFICIALS, AND FOR JURY SELECTION PURPOSES BY COURTS.	111-11-1111
4	GENDER	CHECK WHETHER YOU ARE A MALE OR FEMALE.	

No.	INFORMATION BLOCK TITLE	DESCRIPTION	EXAMPLE
5	DATE OF BIRTH	ENTER THE MONTH, DAY AND YEAR IN WHICH YOU WERE BORN.	12-10-45
6	FULL LEGAL NAME	ENTER YOUR LAST NAME, FIRST NAME, MIDDLE OR MAIDEN NAME, AND SUFFIX (I.E., JR., III). IF NO SUFFIX OR MIDDLE/MAIDEN NAME EXISTS, ENTER 'NONE.' <b>MIDDLE INITIALS ARE NOT ACCEPTABLE.</b>	JONES, ELIZABETH, ANN
6	DAYTIME TELEPHONE NUMBER	ENTER THE TELEPHONE NUMBER AT WHICH YOU CAN BE REACHED DURING THE DAY, INCLUDING THE AREA CODE.	(804) 225-3388
7	ENTER HOME ADDRESS HERE	ENTER THE EXACT ADDRESS OF YOUR RESIDENCE USING HOUSE NUMBER AND STREET NAME OR RURAL ROUTE WITH BOX NUMBER. IF THIS IS A POST OFFICE BOX, MILITARY ADDRESS OR RURAL ADDRESS (YOU MUST COMPLETE THE BACK OF THE FORM, GIVING DETAILED DIRECTIONS WITH WHICH TO IDENTIFY YOUR RESIDENCE.)	111 WEST GRACE STREET, RICHMOND, VA 23235  -OR-  RD 678, NORTH SIDE, ½ MILE EAST OF RD 743 AND 2 MILES WEST OF RD 615
8	INDICATE CITY OR COUNTY OF RESIDENCE	CHECK EITHER CITY OR COUNTY	
9	HAVE YOU EVER BEEN CONVICTED OF A FELONY?	CHECK EITHER THE 'YES' OR 'NO' BOX TO ANSWER THIS QUESTION. IF YOU HAVE MARKED 'YES' TO THIS QUESTION, ENTER THE MONTH, DAY AND YEAR YOUR VOTING RIGHTS WERE RESTORED.	12-4-95
10	HAVE YOU EVER BEEN JUDGED TO BE INCAPACITATED?	CHECK EITHER THE 'YES' OR 'NO' BOX TO ANSWER THIS QUESTION. IF YOU HAVE MARKED 'YES' TO THIS QUESTION, ENTER THE MONTH, DAY AND YEAR THE COURT RESTORED YOU TO CAPACITY.	
	<b>NOTE:</b> IF YOU ARE PRESENTLY IN LAW ENFORCEMENT OR UNDER A PROTECTIVE COURT ORDER, YOU MAY ENTER A P.O. BOX NUMBER IF IT IS LOCATED IN THE SAME JURISDICTION AS YOUR PERMANENT RESIDENCE. IF YOU ARE ACTIVE/RETIRED LAW ENFORCEMENT OR UNDER PROTECTIVE COURT ORDER.	CHECK ONE OF THE TWO BOXES.	

## Agency-Based Voter Registration Reference Manual

NO.	INFORMATION BLOCK TITLE	DESCRIPTION	EXAMPLE
11	REGISTRATION STATEMENT	READ THE STATEMENT BEFORE SIGNING THE APPLICATION.	
	APPLICANT SIGNATURE	SIGN THE FORM USING YOUR FULL LEGAL NAME.  A PERSON WHO CANNOT SIGN MUST MAKE A MARK. THE PROVIDER MAY THEN WRITE HIS/HER NAME UNDERNEATH THE MARK.  POWER OF ATTORNEY CANNOT BE USED FOR VOTER REGISTRATION.	JOHN STEWART SMITH
	DATE	ENTER TODAY'S DATE.	3-6-96

**WHERE TO SEND THE COMPLETED APPLICATION FORM**

At each participating program location within your agency, one individual should be responsible for collecting all completed applications twice a week and forwarding them to the State Board of Elections or to their agency's central distribution point determined by the agency or department representative.



**Review the Section entitled "Completion of the Application Form" before forwarding the forms to the State Board of Elections. It is important that all requirements are met before the application is released from your agency.**

All voter registration application forms must be sent to election officials within five (5) days of receipt. Twice a week, you must complete all of the following steps:

1. Enclose all completed application forms in a pre-addressed, coded envelope, supplied by the State Board of Elections.
2. Mark in the preprinted area on the face of the envelope, the number of forms enclosed.
3. Mail the package to the State Board of Elections using your agency postage or hand-deliver the envelope to your local registrar.

**NOTE: Even when you hand-deliver the forms, place them in a pre-coded envelope since the registrar must tally applications by source.**



## CHAPTER 5 – FORMS AND SUPPLIES

In accordance with NVRA requirements, the State Board of Elections will make available State mail registration forms for private and public distribution. The following information provides general instructions on requesting forms relating to the NVRA.

### THE VOTER REGISTRATION APPLICATION

The State Board of Elections will distribute mail voter registration applications forms to the following entities:

- Public Service Agencies
- Department of Motor Vehicles
- General Registrars

The State Board of Elections will also distribute registration application forms to private groups and individuals.

To reorder this form, contact the State Board of Elections by phone (804) 864-8910, or fax (804) 371-0914, at least 30 days in advance. Ask for or send the request to the attention of NVRA/Voter Registration Coordinator.

### TRANSMITTAL ENVELOPES

Public agencies\* offering voter registration services will use pre-coded transmittal envelopes to forward the registration applications.

\*This procedure may not apply to those agencies that have made other arrangements with their local registrar

The State Board of Elections will distribute pre-coded envelopes to those designated public agencies.

To reorder envelopes, contact the State Board of Elections by phone (804) 864-8910, or fax (804) 371-0194, at least 30 days in advance.

<b>VOTER REGISTRATION APPLICATION DISPLAY BOXES</b>
The State Board of Elections will supply display boxes to the General Registrars, Public Assistance Agencies, and Department of Motor Vehicles.
Each group is responsible for determining the number of the voter registration application display boxes and where these boxes will be displayed.

<b>CHAPTER 6 – CLOSE OF BOOKS</b>
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Applications will be shipped daily, the week prior to the close of books and the week of the close of books.
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It is crucial applications are dated and shipped daily.
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# EXERCISES

Requirements to Register to Vote: True and False Review Questions		
For each of the following statements, put a [T] for true and an [ F] for false.		
1.	<input type="text"/>	A client can remain registered at his old address as well as his new address.
2.	<input type="text"/>	A client on probation can apply to register to vote.
3.	<input type="text"/>	<i>Virginia Voter Registration Agency Certification</i> forms are to be mailed to the State Board of Elections.
4.	<input type="text"/>	A client who will be eighteen at the next general election should be permitted to register in advance and also vote in any intervening primary or special election.
5.	<input type="text"/>	Assistance to applicants may be provided to complete their voter registration application forms.
6.	<input type="text"/>	Virginia does register by party affiliation.
7.	<input type="text"/>	A client must be a resident of Virginia for at least 6 months preceding the next election.
8.	<input type="text"/>	A 17 year-old may register and vote in an election.
9.	<input type="text"/>	If a client can not come to your office and you go to their home to provide services, you are not required to offer voter registration.
10.	<input type="text"/>	A person who is not a United States citizen may apply to register to vote.
		1) false 2) true 3) false 4) true 5) true 6) false 7) false 8) false 9) false 10) true

<b>Review Questions: Agency-Based Voter Registration Form</b>	
For each of the following statements, circle (○) the letter of the response you believe to be most accurate.	
1.	Clients should be offered the opportunity to apply to register to vote:
	a) during the initial face-to-face interview for your agency's services
	b) when they recertify for your agency's services
	c) when they re-apply for your agency's services
	d) all of the above
2.	Clients can use the voter registration application for all of the following except:
	a) to register to vote in the State of Virginia
	b) to change their name
	c) to change their address
	d) to cast a vote in the primary election
3.	After the client completes the voter registration application, the worker should:
	a) review for completeness
	b) choose a political party for the client
	c) file the application in the client's file
	d) destroy the application
4.	When the client requests a mail registration form, the worker should:
	a) explain that once the form is completed, the client should mail it to the local registrar or return the form back into the office
	b) inform the client that he will receive a notice from the general registrar when his registration is approved
	c) all of the above
5.	May a person vote who has been convicted of a felony and has paid his debt to society?
	a) No. Once convicted of a felony conviction, a person loses his or her right to vote even after the sentence is ended
	b) A person who was convicted of a felony and has completed his/ her prison or jail terms; have been free of any suspended sentences, probation or parole <u>for at least five years</u> ; are not currently facing criminal charges in any jurisdiction; and have paid all court ordered costs, fines, and/or restitutions may petition the Governor to have his/her rights restored to vote.
	c) Once a person is no longer in jail or on parole for a felony conviction, he or she may register to vote.

1) d, 2) d, 3) a, 4) c, 5) b

**Appendix I - NVRA STATE DESIGNATED PUBLIC ASSISTANCE AGENCIES.***Contacts for Requesting Additional Supplies*

Department of Health	George Pilarinos	804-864-7016
Department of Social Services	Tom Steinhauer	804-726-7362
Department of Rehabilitative Services	Mary Lutkenhaus	804-662-7610
Department for the Deaf and Hard of Hearing	Christine Ruderson	804-692-9502
Department of Mental Health, Mental Retardation & Substance Abuse Service	Stacey Atwell	804-786-1332
Department for the Blind & Vision Impaired	Jane B. Ward, RT/IL Director	804-371-3112
Virginia Office for Protection and Advocacy	Colleen Miller/Lisa Shehi	804-225-2042
Department of Motor Vehicles	David Pierce	804-367-0515
Department of Game and Inland Fisheries	Raymond Davis	804-367-2387
Virginia Employment Commission, Northern VA Planning District 8	Shelby Robinson Rick Slusher	703-803-0020 703-803-0022
College & Universities-Disabilities Support Service	Deb Wyne	703-993-2474
Virginia Center for Independent Living	Teresa T. Jones	804-662-7027

**APPENDIX II - LOCAL REGISTRAR LISTING****DIRECTORY OF LOCAL REGISTRAR OFFICES**

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
001	Accomack	757- 787-2935
003	Albemarle	434-296-5863
005	Alleghany	540-965-1690
007	Amelia	804-561-3460
009	Amherst	804-946-9315
011	Appomattox	804-352-5302
013	Arlington	703-228-3456
015	Augusta	540-245-5656
017	Bath	540-839- 7266
019	Bedford	540-586-7649
021	Bland	540-688-4441
023	Botetourt	540-473-8235
025	Brunswick	804-848-4414
027	Buchanan	540-935-6534
029	Buckingham	804-969-4304
031	Campbell	804-332-9579
033	Caroline	804-633-9083
035	Carroll	540- 728-2332
036	Charles City	804-829-9210
037	Charlotte	804-542-5856
041	Chesterfield	804-748-1471
043	Clarke	540-955-5168
045	Craig	540-864-6190
047	Culpeper	540-825-8441



**DIRECTORY OF LOCAL REGISTRAR OFFICES**

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
049	Cumberland	804-492-4504
051	Dickenson	540-926-1620
053	Dinwiddie	804-469-4512
057	Essex	804-443-4611
059	Fairfax	703-222-0776
061	Fauquier	540-347-6972
063	Floyd	540-745-9350
065	Fluvanna	804-589-3593
067	Franklin	540-483-3025
069	Frederick	540-662-8723
071	Giles	540-921-2802
073	Gloucester	804-693-3659
075	Goochland	804-556-5303
077	Grayson	540- 773-2842
079	Greene	804-985-5213
081	Greensville	804-348-4228
083	Halifax	804-476-3322
085	Hanover	804-730-6080
087	Henrico	804-501-4347
089	Henry	540-638-5108
091	Highland	540-468-2013
093	Isle of Wight	757-365-6230
095	James City	757-253-6868
097	King& Queen	804-785-6293
099	King George	540- 775-9186

**DIRECTORY OF LOCAL REGISTRAR OFFICES**

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
101	King William	804- 769-4952
103	Lancaster	804-462-5277
105	Lee	540-346-7780
107	Loudoun	703-777 -0380
109	Louisa	540-967-3427
111	Lunenburg	804-696-3071
113	Madison	540-948-6533
115	Mathews	804-725-3200
117	Mecklenburg	804- 738-6191
119	Middlesex	804-758-4420
121	Montgomery	540-382-5741
125	Nelson	804-263-4068
127	New Kent	804-966-9699
131	Northampton	757-678-0480
133	Northumberland	804- 580-4655
135	Nottoway	804-645-8148
137	Orange	540-672-5262
139	Page	540-743-3986
141	Patrick	540-694-7206
143	Pittsylvania	804-432-7971
145	Powhatan	804-598-5604
147	Prince Edward	804-392-4767
149	Prince George	804-733-2794
153	Prince William	703-792-6470

**DIRECTORY OF LOCAL REGISTRAR OFFICES**

	<b>COUNTY</b>	<b>TELEPHONE NUMBER</b>
155	Pulaski	540-980-2111
157	Rappahannock	540-675-3739
159	Richmond	804-333-4772
161	Roanoke	540-772-7500
163	Rockbridge	540-463- 7203
165	Rockingham	540-564-3055
167	Russell	540-889-8006
169	Scott	540-386-6691
171	Shenandoah	540-459-6195
173	Smyth	540-783-4511
175	Southampton	757-653-9280
177	Spotsylvania	540-582-7124
179	Stafford	540-658-4000
181	Surry	757-294-5213
183	Sussex	804-246-5511
185	Tazewell	540-988-7541
187	Warren	540-635-4327
191	Washington	540-676-6227
193	Westmoreland	804-493-8898
195	Wise	540-328-8331
197	Wythe	540-223-6038
199	York	757-890-3440

**DIRECTORY OF LOCAL REGISTRAR OFFICES**

	<b>CITY</b>	<b>TELEPHONE NUMBER</b>
510	Alexandria	703-838-4050
515	Bedford	540-586-7157
520	Bristol	540-645-7318
530	Buena Vista	540-261-8605
540	Charlottesville	804-970-3250
550	Chesapeake	757-382-6128
560	Clifton Forge	540-863-2524
570	Colonial Heights	804-520-9277
580	Covington	540-965-6380
590	Danville	804-799-6560
595	Emporia	804-634-9533
600	Fairfax	703-385- 7890
610	Falls Church	703-248-5085
620	Franklin	757-562-8545
630	Fredericksburg	540-372-1030
640	Galax	540-236-7509
650	Hampton	757-727-6218
660	Harrisonburg	540-433-2150
670	Hopewell	804-541-2232
678	Lexington	540-463-5147
680	Lynchburg	804-847-1609
683	Manassas Park	703-335-8806
685	Manassas	703-257-8230
690	Martinsville	540-656-5123

## DIRECTORY OF LOCAL REGISTRAR OFFICES

	<b>CITY</b>	<b>TELEPHONE NUMBER</b>
700	Newport News	757-926-8683
710	Norfolk	757-664-4353
720	Norton	540-679-1162
730	Petersburg	804-733-2380
735	Poquoson	757-868-3070
740	Portsmouth	757 -393-8644
750	Radford	540- 731-3639
760	Richmond	804-780-5950
770	Roanoke	540-853-2281
775	Salem	540-375-3034
790	Staunton	540-332-3840
800	Suffolk	757-925-6391
810	Virginia Beach	757-427-8683
820	Waynesboro	540-942-6620
830	Williamsburg	757-220-6157
840	Winchester	540-667-5857

## **DO:**

Do treat the applicant as a customer.

Do let the client know that you can provide assistance in filling out the form.

Do maintain strict neutrality with respect to a person's enrollment choice.

Do provide information about registration deadlines and the registration process.

Do instruct applicants that they need to re-register whenever they move, even if it is within the same apartment building.

Do inform applicants they will receive notice from the county/city general registrar when their registration is processed.

Do be sure to follow procedures so that registration applications are handled properly and processed in a timely fashion.

Do allow the customer to choose to use a mail-in registration form.

## **DON'T:**

Don't attempt to influence an applicant's political preference or party affiliation.

Don't display any political or party preference.

Don't attempt to discourage an applicant from registering to vote.

Don't lead the applicant to believe that the decision to register, or not to register, will affect the availability of services or benefits.

Don't attempt to determine the applicant's eligibility to register - that's up to the county/city registrar.

Don't in any way pressure the client to fill out the registration form.

## NOTES

## NOTES



## NOTES